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FACSIMILE COVER SHEET

TO:	Examiner: Mansour M. Said		
FROM:	John D. Magluyan		
RE:	U.S. Application No. 09/824,748 Attorney Docket No. 03500.015284		
FAX NO.:	(703) 872-9306		
DATE:	July 11, 2005	NO. OF PAGES: <small>(including cover page)</small>	8
TIME:	5:25pm	SENT BY:	Gina Marie

MESSAGE

Attached are the following papers for the above-identified application:

1. Amendment, and
2. Transmittal for Amendment.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

July 11, 2005

(Date of Deposit)

John D. Magluyan, Reg. No. 56,867
(Name of Attorney for Applicant)

July 11, 2005

Date of Signature

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03500.015284.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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JUL 11 2005

In re Application of:)	Examiner: Mansour M. Said
ATSUSHI TANAKA)	Group Art Unit: 2673
Application No.: 09/824,748)	
Filed: April 4, 2001)	
For: COORDINATE INPUT)	
APPARATUS, COORDINATE)	
INPUTTING METHOD,)	
INFORMATION DISPLAY)	
SYSTEM AND STORAGE)	
MEDIUM AND PROGRAM	: July 11, 2005	

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated May 20, 2005, please amend the
 above-identified application, as follows:

I hereby certify that this correspondence is being facsimile transmitted to
 the U.S. Patent and Trademark Office on:

July 11, 2005
 (Date of Deposit)

John D. McGlynn, Reg. No. 56,867
 (Name of Attorney for Applicant)


 Signature

July 11, 2005
 Date of Signature

In re Application of:

ATSUSHI TANAKA

Application No.: 09/824,748

Filed: April 4, 2001

Docket No.

03500.015284.

Examiner: Mansour M. Said

Group Art Unit: 2673

For: COORDINATE INPUT APPARATUS, COORDINATE
INPUTTING METHOD, INFORMATION DISPLAY
SYSTEM AND STORAGE MEDIUM AND PROGRAM

Date: July 11, 2005

Mail Stop Amendment
 THE COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	2	MINUS	45	= 0	x \$25 \$50	
INDEP. CLAIMS	2	MINUS	5	= 0	x \$100 \$200	
Fee for Multiple Dependent claims \$180*/\$360						\$.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$ _____ is enclosed.
- Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


John D. Magluyan
Attorney for Applicant
Registration No.: 56,867

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Form #120

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PAGE 8/8 * RCVD AT 7/11/2005 8:24:19 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID:714 540 9823 * DURATION (mm:ss):02:50